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Date: JULY 26, 2004

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From: FRANK C. NICHOLAS
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Client/Matter No.: US020023 (7790/378)

of Pages: 18
(including cover sheet)

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PT/PC/22: (1/3/22) amended to US Patent 7,324,441. One (1) copy of the Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office (USPTO) is required to be submitted to the Patent and Trademark Office (PTO) and the USPTO.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket No	US020023 (7790/378)
	Application Number	10/055,351
	Filing Date	JANUARY 22, 2002
	First Named Inventor	GERT W. BRUNING
	Group Art Unit	2674
	Examiner	NGUYEN, JENNIFER

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response to Non-Final Office Action Dated March 26, 2004 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> One-Month Petition for Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, and <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.		
<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.		

CALCULATION OF FEE

	Claims After Amendment		Highest No Previously Paid For	Present Extra
Total		Minus		0
Indep.		Minus		0
First Presentation of Multiple Dep. Claim				

Small Entity		or	Large Entity	
Rate	Add'l Fee		Rate	Add'l Fee
\$9=	0		\$18=	
\$43	0		\$86	
\$145	---		\$290=	
total add'l fee			total add'l fee	
\$ 0			\$	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
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